

6TL09JDKZ1
20-00889

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

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Document Number Override		Primary Crash Document #	Agency Crash Number 20-00889	Investigating Officer/Deputy DEPUTY B. SCHLOUGH	
Crash Date 01/24/2020		Crash Time 07:00 AM	Date Arrived 01/24/2020	Time Arrived 07:12 AM	
Date Notified 01/24/2020		Time Notified 07:06 AM	Total Units 01	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	Reconstruction By
	Photos By
	Additional Information NONE

NON REPORTABLE

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING W/B ON A SLUSHY AND SLIPPERY USH 12. OPERATOR OR UNIT 1 LOST CONTROL AND ENTERED THE W/B DITCH. UNIT 1 CAME TO REST STUCK IN THE SNOW FACING EAST. NO DAMAGE TO UNIT 1.

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Location

ON USH12 WB 508 FT N OF STH33 WB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.512043061	Longitude -89.783024121
	X Coordinate 275048.28125	Y Coordinate 4821442
	Structure Type	

Crash Scene

First Harmful Event		First Harmful Event Location	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAWN	
Road Surface Condition(s) SNOW		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 65	Total Lanes 4	
	Most Harmful Event: Collision With		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT	Vehicle					
	01	License Plate Number 657RNM		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FAHP36N09W161872		Make FORD	Year 2009	Model FOCUS
	VEHICLE	Color BLK - BLACK		Body Style SD - SEDAN		Bus Use
		Initial Contact Point 00 - NON-COLLISION		Vehicle Damage		
Extent Of Damage NO DAMAGE		00 - NO DAMAGE				

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions SPEED TOO FAST/COND				
01	Owner Name ADAM LEE MOE (608) 963-1344		Owner Address 1233 VICTORIA CIR BARABOO, WI 53913 , US		
	Sequence Of Events				
01	Event				
	Event				
	Event				
	Event				
02	Event				
	Event				
	Event				
	Event				
03	Event				
	Event				
	Event				
	Event				
04	Event				
	Event				
	Event				
	Event				
UNIT	Policy Holder				
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual ADAM MOE		
	Individual				
	Driver ADAM LEE MOE (608) 963-1344		Citations Issued 0	Sex MALE	
Address 1233 VICTORIA CIR BARABOO, WI 53913 , US		Date of Birth	Race WHITE		
Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT	Safety Equipment		On Duty Crash		
	Safety Equipment		SHOULDER & LAP BELT		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT			
	Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance			
01	001	Injury		Airbag	
		NO APPARENT INJURY		NON DEPLOYED	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death		
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED					

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UNIT	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other					
	To/From School					
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition APPEARED NORMAL					